



Jim Wells County

Texas Public Information Act Request



COUNTY OF JIM WELLS

Please fill out the following information to request a document from the County of Jim Wells

Requestor's Name: _____

Mailing Address: _____

City, State, Zip: _____

Phone: _____ **Fax #:** _____

Email Address: _____

Date of Request: _____

.....
Description of Information requested: (Please describe below the document(s) you request to inspect and/or copy, or attach separate request to this form).

Which office are you requesting document from?

_____ **Date:** _____
Requestor's Signature

.....
_____ **I wish to receive copies of the requested information via:**

_____ **Email** _____ **Postal Service** _____ **Pick Up** _____ **Fax**

_____ **I do not want copies, but wish to inspect the originals of the requested information.**